Original Submission			Page of	
	Revisio	on #		
			FANT'S DBE/SUBCONSULTANT O UTILIZATION FORM	
		Must be provided as an attachm	ent to each New or Revised Technical Prop	oosal
Consultant:			Telephone:	Ext
Prepa	red by:_		Fax:	
тота	L CONTI	RACT/MODIFICATION AMOUNT: \$	DATE OF EXECUTION:	Department Use Only)
FEDERAL PROJECT PIN #			PROJECT LOCATION:	
TOTAL DBE % PARTICIPATION FOR THIS SUBMISSION				
W D B B E E	Non DBE	Firm Name	Description of Work & Item Number	Actual \$ Value
Total >				
		must make a good faith effort to in re to be part of this project team, a	clude <u>Certified</u> DBE firms in all aspects of detailed explanation is required.	the project. If no
I	Equal Op	pportunity Use:		
Form received:/ Verified by:				
-	A	ccepted Rejected		
C	ec: 🗆 C	ontracts Other		

For a complete list of certified firms and company designation (WBE/DBE) go to $\underline{\text{http://www.maine.gov/mdot}}$